

Chapter 13 Plan Form, Revised 10/24/2005

CHAPTER 13 PLAN  
UNITED STATES BANKRUPTCY COURT  
Southern DISTRICT OF MISSISSIPPI

CASE NO. 11-00247

Debtor Devaan Nicole Smith SS # XXX-XX-2477 Current Monthly Income \$ 2,592.00  
Joint Debtor NA SS # XXX-XX-NA Current Monthly Income \$ NA  
Address 2071 Leesburg Road, Morton, MS. 38927 No. of Dependents 3  
Telephone No. 601-503-5816 TAX REFUNDS AND EIC FOR DISTRIBUTION: NA

THIS PLAN DOES NOT ALLOW CLAIMS. Creditors must file a proof of claim to be paid under any plan that may be confirmed, and the treatment of all secured / priority debts must be provided for in this plan.

PAYMENT AND LENGTH OF PLAN

The plan period shall be for a period of 36 months, not to exceed 60 months. Debtor or Joint Debtor will make payments directly to the Trustee ONLY if self-employed, unemployed, or the recipient of government benefits.

- (A) Debtor shall pay \$ 344.00 per (monthly / semi-monthly / weekly / bi-weekly) to the Chapter 13 Trustee. A payroll deduction order will be issued to Debtor's employer @: JOHAN MONT. LLC  
6711 Old Millstone Rd  
Forest, MS. 38074
- (B) Joint Debtor shall pay \$ NA per (monthly / semi-monthly / weekly / bi-weekly) to the Chapter 13 Trustee. A payroll deduction order will be issued to Debtor's employer @: NA

PRIORITY CREDITORS. Filed claims that are not disallowed to be paid in full: IRS \$ NA @ \$ NA /mo  
State Tax Commission \$ NA @ \$ NA /mo  
Other \$ NA @ \$ NA /mo

DOMESTIC SUPPORT OBLIGATIONS (POST PETITION) DUE TO: NA

beginning NA in the amount of \$ NA per month shall be paid:  
\_\_\_\_\_ direct \_\_\_\_\_ through payroll deduction \_\_\_\_\_ through the plan.

PREPETITION DOMESTIC SUPPORT ARREARAGE CLAIMS DUE TO: NA

in the amount of \$ NA shall be paid \$ NA per month:  
\_\_\_\_\_ through payroll deduction \_\_\_\_\_ through the plan.

HOME MORTGAGE(S) NA

MTG PMTS TO: _____	BEGINNING _____	@ \$ _____	( ) PLAN ( ) DIRECT
MTG PMTS TO: _____	BEGINNING _____	@ \$ _____	( ) PLAN ( ) DIRECT
MTG PMTS TO: _____	BEGINNING _____	@ \$ _____	( ) PLAN ( ) DIRECT
MTG ARREARS TO: <u>NA</u>	THROUGH _____	\$ _____	@ \$ _____ /MO*
(*Including interest at _____%)			
MTG ARREARS TO: _____	THROUGH _____	\$ _____	@ \$ _____ /MO*
(*Including interest at _____%)			
MTG ARREARS TO: _____	THROUGH _____	\$ _____	@ \$ _____ /MO*
(*Including interest at _____%)			

Debtor's Initials DNS Joint Debtor's Initials \_\_\_\_\_

**SECURED CLAIMS.** Creditors that have filed claims that are not disallowed are to retain lien(s) under 11 U.S.C. 1325(a)(5)(B)(i) until plan is completed and be paid as secured claimant(s) the sum set out in the column "Total Amt. to be Paid" or pursuant to Order of the Court. That portion of the claim not paid as secured shall be paid as an unsecured claim.

Creditor's Name	Collateral	Approx. Amt. Owed	Value	Intrst. Rate	Total Amt. To Be Paid	Monthly Payment
<u>Santander</u>	<u>2000 Toyota Tundra</u>	<u>11,420<sup>00</sup></u>	<u>7,800</u>	<u>7%</u>	<u>8,670.24</u>	<u>280.84</u>

**SPECIAL CLAIMANTS.** (Co-signed debts, collateral for abandonment, etc.) ON ABANDONED COLLATERAL, DEBTOR TO PAY ZERO ON SECURED PORTION OF DEBT. Where proposal is for payment, creditor must file a proof of claim to receive proposed payment.

Creditor's Name	Collateral or Type of Debt	Approx. Amt. Owed	Proposal to Be Paid
<u>Pioneer Credit</u>	<u>2001 Honda M/C</u>	<u>1,620<sup>00</sup></u>	<u>abandon pay zero</u>
<u>"</u>	<u>1998 Grand Prix</u>	<u>4,253<sup>00</sup></u>	<u>"</u>
<u>Vanderbilt</u>	<u>Mobile</u>	<u>18,484</u>	<u>"</u>

**SPECIAL PROVISIONS** for all payments to be paid through the plan, including, but not limited to, adequate protection payments:

**UNSECURED DEBTS** totaling approximately \$ 26,118<sup>00</sup> are to be paid in deferred payments to Creditors that have filed claims that are not disallowed: 100% IN FULL or 100% (PERCENT) MINIMUM.

Total Attorney Fees Charged \$ 2,800<sup>00</sup>  
 Attorney Fees Previously Paid \$ 326<sup>00</sup>  
 Attorney fees to be paid through the plan \$ 2,474<sup>00</sup>

Pay administrative costs and debtor's attorney fees pursuant to Court Order and/or local rules.

Name/Address/Phone # of Vehicle Insurance Co/Agent

Telephone/Fax

Attorney for Debtor (Name/Address/Phone # / Email)

Robert Rex McElamy, Jr.  
P.O. Box 1397  
Clinton, Ms. 39060  
 Telephone/Fax 601-924-5861 FAX  
 E-mail Address 924-1516

DATE: 2-8-11

DEBTOR'S SIGNATURE  
 JOINT DEBTOR'S SIGNATURE  
 ATTORNEY'S SIGNATURE

Kevin & Nicole Smith  
Robert Rex McElamy, Jr.